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Fleet Hospital 20 Packs Its Tents
BY JOC Bill Austin, Navy Hospital Support Office
Jacksonville, Fla.

GUANTANAMO BAY, Cuba - The Sailors of Fleet
Hospital 20 are heading home.

After nearly a year of providing medical treatment
to suspected Taliban and al Qaeda detainees being held
in Guantanamo, the medical providers and support staff
of the deployed hospital unit are packing their seabags
and their tents and heading north, most to Camp Lejeune,
N.C., but some from other Navy Medicine facilities as

well.

Last January, this remote, almost serene, duty station was tasked with building a detention facility to house captured combatants from Afghanistan. A Joint Task Force was quickly put together to handle this massive effort. The end result was the now famous Camp X-Ray.

Along with the camp came the need for medical and health support for the detainees. Enter Fleet Hospital 20.

Working in the hot Cuban sun, Sailors rolled up their sleeves, and cleared the sagebrush to set up a series of connecting tents that would serve as their field hospital. Inside, they were filled with all the necessary gadgetry to handle any medical situation.

Just eight days after they started clearing land, the health providers saw their first detainee for treatment - the same quality treatment that service members and their families receive throughout the world.

The Fleet Hospital became a media focal point. Twice a week the press arrived to see firsthand how the detainees fared under the skillful hands of the medical team. Military officials and members of Congress followed.

As months of day and night shifts took care of patients inside the tents, the field just beyond the barbed wire compound was changing fast. Construction was underway for a new detention facility and hospital that would eventually replace Camp X-Ray as well as the tents of Fleet Hospital 20.

The new detention hospital lies within the same barbed wire compound and is an impressive structure that looks like any other military hospital. The only exception is here there are the watchful eyes of Army guards.

Since December, reliefs have been arriving to replace members of Fleet Hospital 20 - fresh faces energized and ready for the task at hand.

"I've been here two days and I love it," said Hospitalman Robert Harper, who flew in for a six-month hitch from Bethesda, Md. Harper has been working on the ward where some of his duties include administering medication to the detainee patients.

The departing group is upbeat. Many expressed pride in playing a vital role in this historic event.

"I think it's neat there are a lot of young people here that just came in the Navy, and we can come here and do this," said Hospital Corpsman 3rd Class Monica Vanderlois, who will head back to Camp Lejeune this week. "I feel very proud."

"As I see the current staff of the Fleet Hospital transferring out, and the transition of them teaching the new who are arriving on this mission, it's truly an amazing thing," said Chief Hospital Corpsman Marvin

Kitchens, who serves as the hospital's senior Enlisted Advisor. "(They) do a phenomenal job and do the right thing for something that has never been done before in Navy Medicine."

One new face has been here before. Lt. Cambrai Reed, Nurse Corps, an original member of the Fleet Hospital 20 team, volunteered to come back for a second tour. The changes took her by surprise.

"I can't believe how different everything looks," said Reed as she walked through the new hospital.

The Fleet Hospital 20 Sailor with the most time under the tents is officer-in-charge Cmdr. Jaime Carroll, Nurse Corps. She's been here since the land was cleared in January 2002, but she's finally packing her seabags, too. She's going home to Naval Hospital Camp Lejeune.

"The credit for the success of Fleet Hospital 20 goes to all the people who have come here since the very beginning," said Carroll. "Every single individual who has been here, working with the team, and being committed to this mission."

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Navy Docs Lift Off on Today's Shuttle Flight
By Brian Badura, Bureau of Medicine and Surgery

WASHINGTON - Navy Medicine's Capt. Dave Brown, Medical Corps, and Cmdr. Laurel Salton Clark, Medical Corps, lifted off this morning on shuttle mission STS-107.

Their mission as part of a seven member crew aboard the shuttle orbiter Columbia will pack more than 90 medical, biological and physical science experiments and investigations into a 16-day flight.

Fifteen experiments will look at the effects of weightlessness on the human body, including bone and muscle loss. Tests will also assess the use of different methods of fire suppression in space.

"We will work the payloads on orbit and hand them back to the primary researcher after the mission, hopefully passing on the information that they were looking for," Clark said.

In addition to being an astronaut, Clark is a flight surgeon, radiation health officer and undersea medicine officer.

To meet the mission's goals, the crew is divided into two teams, splitting the workload and working around the clock.

According to NASA, STS-107 will be the last dedicated science mission for the shuttle program. The mission was originally intended to lift off in 2000, but other higher priority missions and maintenance concerns pushed the launch back.

Brown, who is qualified as both a flight surgeon and as a naval aviator, offered this advice for those

who may be interested becoming part of the space program.

"I didn't plan my career for NASA. As it turns out, the things that I have done qualified me to be here," he said. "If you get an idea in your head that there is something you really want to do, just go do it."

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Bremerton A Best Base for Community Spirit and Support
By Judith Robertson, Naval Hospital Bremerton

BREMERTON, Wash. - "Caring, for Life" is more than just a motto at Naval Hospital Bremerton; it is a way of life.

It's this type of attitude and service that led to Bremerton's recognition as "Best Base" in the Navy for community spirit and support in the second annual Navy Times newspaper. The award was announced this week.

"A healthy military is, of course, essential to preparedness," said Navy Times' citation announcing Naval Hospital Bremerton's selection. "It's just as important to build a healthy community. With outreach programs and activities that generate a spirit of camaraderie and family, Bremerton's programs connect its residents with each other and the surrounding communities."

Situated miles from, and in between, Naval Station Bremerton and Submarine Base Bangor, the hospital campus is on 49 acres overlooking Ostrich Bay near Bremerton. Since the enclosed hospital campus contains its own Bachelor's Enlisted Quarters, gym and dining facility, it qualifies as a separate base, one of nine naval hospitals in that category.

According to Command Master Chief Richard Lopez, much of the credit for hospital's great community spirit is the enlisted community's attitude. Pride in their jobs, their command, and the Navy is clear as they volunteer throughout the community, he said.

"All enlisted groups are involved. The Chief Petty Officers set the pace by assuming leadership positions and the rest follow. The CPO group was the first to volunteer to help build the children's playground in the community. The First Class Association, the Second Classes and the Junior Enlisted all volunteer in both hospital-sponsored events and community activities like patrolling at Whaling Days or helping at Seafair," Lopez said.

"At Naval Hospital Bremerton, we believe in caring, for life," said Capt. Christine Hunter, the hospital's commanding officer. "It is our great privilege to be involved in our community, supporting people of all ages.

"From car seat fittings to fleet outreach, and from advice on community disaster preparation to easing

stress with our yoga classes, the staff constantly amaze me with their energy. I am very proud to accept this recognition on behalf of our fine military and civilian team."

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Bethesda to Open Open Access Branch Clinic
By Journalist 2nd Class Rebecca Horton, National Naval Medical Center Bethesda

COLUMBIA, Md. - This spring, National Naval Medical Center Bethesda will open Branch Medical Clinic (BMC) Columbia. The clinic will be one of the first military clinics that will offer all open access appointments.

"The idea behind open access is that both patients and providers benefit if everyone in the clinic is able to do today's work today," said Lt. Cmdr. Sabrina Putney, Nurse Corps, the satellite clinic's project officer. "Today means today, not within 24 hours. If our patients call before 1 p.m., we will ensure that they are seen that day."

Patients who call after 1 p.m. will be asked to call back early the next morning to get the first available appointment.

"We are very excited to be able to open this new clinic," said Lt. Chris Gillette, Nurse Corps, the BMC Columbia service manager and assistant project officer. "We have been working since June (2002) to get everything ready, so we will be open to patients this spring," said Gillette.

The idea for the clinic began more than two years ago to make visiting the doctor more convenient for patients residing in the Columbia area.

Putney, Gillette and Hospital Corpsman 2nd Class Linda Toryak, the clinic's leading chief petty officer, have devoted every day since September to setting up the clinic.

"We are the architects of this entire project," said Gillette. "We have done everything from finding the clinic spaces, designing the floor plan, picking out carpet and office equipment to working out the logistics of clinic staff and hours of operation."

Toryak said the clinic would focus on family practice, serving TRICARE eligible beneficiaries in the Columbia area. Services will include non-emergent acute care, school physicals, immunizations, routine gynecological services, minor surgical procedures, well baby exams, routine laboratory services, contract radiological services, and a full service pharmacy.

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Camp Lejeune Cuts Ribbon on Renovated OB/Gyn Clinic
By Raymond Applewhite, Naval Hospital Lejeune

LEJEUNE, N.C. - Naval Hospital Lejeune cut the ribbon on its gift to area women beneficiaries last

month, opening its newly renovated obstetrics and gynecology clinic.

The sparkling clinic not only received a face-lift with new carpeting, flooring, ceiling, comfortable chairs, and paint, but now also has state-of-the-art equipment.

Before cutting the ribbon, Capt. Raymond Bozman, Medical Corps, the hospital's commanding officer, praised the staff and everyone involved in the project for their hard work. Singled out in his remarks was Lt. (j.g.) Tyler Plain, Civil Engineer Corps, for heading up a project that was completed in "record time and for only \$180,000."

Plain planned work around provider's schedules to prevent interrupting patient services, which meant staff worked after hours and on weekends.

"I could not be more proud of the crew, a remarkably talented group of men and women. They really know what it means to hustle," said Plain.

According to Cmdr. Carolyn Howard, Nurse Corps, head of internal maternal infant department, the new spaces will greatly benefit beneficiaries.

"We're improving access greatly. The spaces are not only prettier, but more importantly they're wider and more comfortable," she said.

Along with renovated spaces, the clinic is offering other enhancements.

"We now have seven midwives," said Lt. Amy Wootten, Nurse Corps, head of the OB/GYN clinic division. "The new family-centered care concept treats mom and baby as one unit from the initial prenatal visit to the six weeks postpartum care visit."

Additionally, the hospital now has a fulltime lactation consultant.

Plain said other renovations underway include the pediatric clinic, which is about 40 percent complete; the operating suite; and the quarterdeck.

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Whiting Field Tobacco Video A DoD Competitor

By Kevin Gaddie, Naval Air Station Whiting Field, Fla.

WHITING FIELD, Fla. - Branch Medical Clinic Whiting Field's tobacco cessation training video is being considered for a Department of Defense (DoD) visual production award.

NAS Whiting Field's Branch Medical Clinic, with assistance from the Chief of Naval Education and Training's visual information department, joined forces and put together a 15-minute video titled "The Tobacco Cessation Program: If You Wait, It Could Be Too Late."

Lt. Mike Kohler, Nurse Corps, the clinic's health promotion coordinator, spearheaded the project. The video took about five months to shoot and many of the clinic staff is seen throughout the production.

Distributed by Naval Education and Training Professional Development and Technology Center's (NETPDTC) Pensacola Regional Electronic Media Center, the video is now being used by all 12 of the hospital's branch medical clinics across four states in conjunction with their tobacco cessation programs. The Navy Environmental Health Center will incorporate it in smoking cessation programs Navy-wide. The American Lung Association and Sacred Heart Hospital in Pensacola also use it.

The video was entered in the DoD Visual Production Awards Competition in the Training, Internal/Public Information and Documentary categories. The production awards are an initiative of the Assistant Secretary of Defense For Public Affairs.

"I was very surprised and honored when I found out the video was being put in for a DoD award," Kohler said.

Kohler decided to make the video during a tobacco cessation course he was conducting at the clinic.

"The Tobacco Cessation Program we use is a seven week course," he said. "During the third week we have 'Quit Day.' One of the suggestions in the booklet is to bring in a panel of ex-smokers who have been off tobacco for more than six months. When I got here, I was having difficulty convening a panel for 'Quit Day,' so I came up with the idea to make a video."

The subject of the video is Regina White, a long-time smoker and the widow of a Navy pilot who also smoked. White tells her touching story of her struggle to quit, the death of her husband as a result of smoking, and her own difficulties in coping with life-threatening diseases as a result of smoking.

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Every Day In Navy Medicine

On any given day in Navy Medicine, patients are seen, prescriptions are filled, teeth are checked, babies are born. Here's a thumbnail sketch:

- 36,937 outpatient visits
- 833 inpatients
- 54 babies born
- 67,235 prescriptions filled
- 333 surgeries performed
- 8,682 dental seatings
- Each dentist provides \$1,400 worth of dental care

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First Person: Lt. Heidi Waugus, Medical Service Corps
(Waugus is the operations officer in the medical services directorate, Naval Medical Center San Diego. These are her words on tackling the gender barrier in the rough-and-tumble world of football.)

All NFL (National Football League) rules apply,

full pads and full tackle. You get hit and it can hurt. I play wide receiver for the San Diego Sunfire. It's a semi-pro women's league.

I like football because there's a lot of thinking involved. I like that this is a mental as well as a physical sport. You have to know what your assignment is on each play and how you're going to execute it. I'm fascinated by how all the pieces come together on game day. It takes a great deal of coordination by the coaches and synchronicity from the players.

I enjoy the strategy involved. We have many offenses and defenses that we run. The game itself is very rewarding for me. I feel it opens up a whole new frontier for women. I find the great diversity of women on the team very interesting. We all learn a great deal from each person's culture. It opens up a whole new world I've never known.

My personality is laid back, I'm quiet and reserved. I'd rather be home reading a book than going out to a club. But I can be a physical person. I have always loved football and wanted to play. I played on my high school team and was the first woman player to letter on an all male football team at Kings High School in Cincinnati, Ohio. Although teams we played against weren't thrilled with the idea of me playing, my teammates were very supportive of me.

As a matter of fact, everyone has been very supportive of me. People from my command have attended and enjoyed the games. I've heard people say as I pass by, "Hey, that's the girl who plays football!"

I'm very content with my choice to play this sport. It's been a great experience for me. Physically, mentally and spiritually, it's a unique experience.

Playing football can give Navy Medicine women a new opportunity to expand on physical readiness. It may even lead to newfound confidence and self-discovery. It has for me.

- Interviewed by Aveline V. Allen, Bureau of Medicine & Surgery, Washington, DC

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New Web-Based Credentialing Monitors Provider Readiness From Department of Defense Public Affairs

WASHINGTON - The Department of Defense announced this week a new medical provider repository that will allow medical contingency planners to identify military healthcare providers qualified in medical management of combat casualties. In addition to battle trauma, the repository will also identify those who are qualified in managing nuclear, biological or chemical casualties.

The web-based Central Credentials Quality Assurance System (CCQAS) ensures that qualified providers are identified and ready to deploy in time of emergency, according to Capt. Ben Long, Medical Service Corps,

resources

information technology program office (RITPO) program manager for DoD.

"This version of CCQAS goes well beyond its key role in supporting peacetime health care in the Department of Defense," said Long. "We've worked hard to make this web-based version user-friendly with a solid reporting capability to get the right clinical provider to the right place at the right time in support of the medical readiness mission."

The new CCQAS maintains and tracks the credentials, readiness status, training, malpractice claims, and adverse privileging actions of providers at more than 500 military treatment facilities and reserve centers. Other accessible information includes clinician demographics, education and training, and medical readiness requirements.

Authorized users may access the system online from any place, at any time. It provides improved data quality and supplies easy-to-use, powerful standard and ad hoc reports. The new system consolidates 540 separate databases of the previous client-server version and replaces six service systems.

The Military Health System Information Technology Program Executive Office recently selected CCQAS as the recipient of the 2002 Team Award. The team effort, which employed a rapid and joint application development approach, resulted in an application with outstanding reviews from CCQAS users. Four out of five users surveyed indicated a high degree of satisfaction and acknowledged that the application significantly improves their productivity.

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Healthwatch: What To Do For Stomach Flu

By Hospitalman Ariel Black and Lt. Tracey Torres, Nurse Corps, U.S. Naval Hospital Yokosuka

YOKOSUKA, Japan - Got stomach flu? Here are some hints on what to do.

Stomach flu, a viral infection that affects the stomach and small intestine, has symptoms ranging from fever, nausea, vomiting, fatigue, loss of appetite, and diarrhea. Their onset may be sudden or can occur over a number of hours. The good news is that the virus typically lasts for a short period - one to three days.

The most important thing to do is to rest your body as well as your stomach. Initially, it is best to postpone eating and stick to drinking clear fluids.

If vomiting appears as a symptom, it is best to have only small sips of clear liquids. Drinking too much may cause more vomiting.

Your choice of liquids is important when suffering from stomach flu. If water is the only thing you can keep down, that's okay. However, if you are vomiting

excessively you must replace the minerals, sodium and potassium that are lost.

Sports drinks that contain vitamins and minerals in small amounts may help replenish lost nutrients. Avoid liquids that are acidic, such as orange juice, or liquids with caffeine. You may find a clear non-caffeine soda drink agreeable, but avoid colas and other dark sodas. Alcohol should be avoided as it increases dehydration and may aggravate symptoms.

You may begin eating bland foods when you have stopped vomiting for several hours and are able to drink clear liquids without further upset. You will probably reach this phase 12-24 hours after the initial onset of symptoms. Start with a diet that consists of foods such as bananas, rice, applesauce, and toast before moving to other items as symptoms subside.

If you have been vomiting an entire day or have had serious diarrhea more than three times during a bout with stomach flu, you should contact your health care provider. Most healthy adults will recover from stomach flu with home treatment, but the elderly, small children, and those who suffer from chronic illnesses are at a greater risk of dehydration and may need more time to recuperate.

One of the best ways to prevent the spread of stomach flu is through frequent hand washing. Avoid sharing food or drinks with other people, as these practices can also spread the virus.

Most importantly, don't try to be a hero by toughing it out at work when you have the flu. Take time off to rest and to help avoid spreading the virus and making others sick. Your coworkers will thank you for it!

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Got news? Navy & Marine Corps Medical News seeks stories and photos about Navy Medicine people, places, ideas, innovations, events. Call the MEDNEWS editor at 202 762-3319 or e-mail JaKDavis@us.med.navy.mil.